SECRET
Approved for Release: 2025/05/27 C07176744

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP

FILE NO. 1138708

TO: (Check)
- CHIEF, CONTROL DIVISION, OP
- CHIEF, CONTRACT PERSONNEL DIVISION, OP
- X CHIEF, [illegible] (OPERATING COMPONENT FOR ACTION)
  ATTN: [illegible]

SS NUMBER [illegible]
EMPLOYEE NUMBER [illegible]
ID CARD NUMBER

REF. [illegible]

STATUS: X STAFF | CONTRACT

OFFICIAL COVER: ESTABLISHED | X CANCELLED | CONTINUED

SUBJECT [illegible]

UNIT

KEEP ON TOP OF CCS FILE

ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)	X CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)
☐ BASIC COVER PROVIDED EFFECTIVE DATE _____	X EFFECTIVE DATE: [illegible]
☐ OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify)	X FORM 3254 [illegible] W-2 TO BE ISSUED (HHB 20-7)
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HHB 20-7)	X SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HHB 20-7)
FORM 3254 _____ W-2 TO BE ISSUED. (HHB 20-11)	X EAA: CATEGORY I ☐ CATEGORY II ☐
SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-2e)	X RETURN ALL OFFICIAL DOCUMENTATION TO CCS
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-2e)	X SUBMIT FORM 2688 FOR [illegible] HOSPITALIZATION CARD.
EAA. CATEGORY I ☐ CATEGORY II ☐	
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD	

CENCO (Check one)	DATE	INITIALS
EA		
EC	22 JAN 79	[illegible]
ED		
EX		

REMARKS AND/OR COVER HISTORY

[illegible]

b1
b2
b3
b6

DISTRIBUTION:
COPY 1 - CD/TRB OR CPD CONTROL
COPY 2 - OPERATING COMPONENT
COPY 3 - OS/SRD
COPY 4 - OE/DO/TFB
COPY 5 - CCS-FILE

[illegible]

CHIEF, OFFICIAL COVER BRANCH, CENTRAL COVER STAFF

FORM 4-77 1551 USE PREVIOUS EDITION

SECRET WN-SISM

E-2, IMPDET CL BY: 021964

(13-20-43)

Approved for Release: 2025/05/27 C07176744